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PTO/SB/01 (12-97)

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**DECLARATION FOR UTILITY OR  
DESIGN  
PATENT APPLICATION  
(37 CFR 1.63)**

Declaration Submitted with Initial Filing       Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number	IN01154K
First Named Inventor	CHEN, et al
<b>COMPLETE IF KNOWN</b>	
Application Number	/
Filing Date	April 3, 2001
Group Art Unit	To Be Assigned
Examiner Name	To Be Assigned

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

MACROCYCLIC NS3-SERINE PROTEASE INHIBITORS OF HEPATITIS C VIRUS  
COMPRISING N-CYCLIC P2 MOIETIES

the specification of which

(Title of the Invention)

is attached hereto

OR

was filed on (MM/DD/YYYY)

as United States Application Number or PCT International

Application Number  and was amended on (MM/DD/YYYY)  (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?
			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	
60/194,607	4/5/ 2000	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

**CERTIFICATE OF MAILING**

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on this date:

Typed or printed name

Signature

Date

Express Mail Label No. EL403238299US

Date April 3, 2001

Please type a plus sign (+) inside this box → **DECLARATION — Utility or Design Patent Application**

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U.S. Parent Application or PCT Parent Number		Parent Filing Date (MM/DD/YYYY)		Parent Patent Number (if applicable)	
<input type="checkbox"/> Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto. As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: <input checked="" type="checkbox"/> Customer Number <input type="text" value="24265"/> → <input type="checkbox"/> Place Customer Number Bar Code Label here <input type="checkbox"/> Registered practitioner(s) name/registration number listed below					
Name	Registration Number	Name		Registration Number	
<input type="checkbox"/> Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.					
Direct all correspondence to: <input checked="" type="checkbox"/> Customer Number or Bar Code Label <input type="text" value="24265"/> OR <input type="checkbox"/> Correspondence address below					
Name	PALAIYUR S. KALYANARAMAN		Reg. No. 34634		
Address					
Address					
City			State		ZIP
Country	Telephone	(908) 298-5068		Fax	(908) 298-5388
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.					
Name of Sole or First Inventor:		<input type="checkbox"/> A petition has been filed for this unsigned inventor Given Name (first and middle [if any]) <input type="text" value="KEVIN X."/> Family Name or Surname <input type="text" value="CHEN"/> Inventor's Signature  Date <input type="text" value="03/08/01"/>			
Residence: City	PISCATAWAY	State	NJ	Country	U.S.A.
Post Office Address	35 Royal Drive, #168				
Post Office Address					
City	PISCATAWAY	State	NJ	ZIP	08854
Country					U.S.A.
<input checked="" type="checkbox"/> Additional inventors are being named on the <input type="text" value="4"/> supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto					

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PTO/SB/02A (3-97)

## DECLARATION

### ADDITIONAL INVENTOR(S) Supplemental Sheet

Page 3 of 7

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any])				Family Name or Surname				
ASHOK		ARASAPPAN						
Inventor's Signature	<i>Ashok Arasappan</i>						Date	03/08/01
Residence: City	BRIDGEWATER	State	NJ	Country	U.S.A.	Citizenship	INDIA	
Post Office Address	18 LARSEN COURT							
Post Office Address								
City	BRIDGEWATER	State	NJ	ZIP	08807	Country	U.S.A.	
Name of Additional Joint Inventor, if any:	<input type="checkbox"/> A petition has been filed for this unsigned inventor							
Given Name (first and middle [if any])				Family Name or Surname				
SRIKANTH		VENKATRAMAN						
Inventor's Signature	<i>S. V.</i>						Date	03/08/01
Residence: City	FORDS	State	NJ	Country	U.S.A.	Citizenship	INDIA	
Post Office Address	6 TULIP DRIVE, #3H							
Post Office Address								
City	FORDS	State	NJ	ZIP	08863	Country	U.S.A.	
Name of Additional Joint Inventor, if any:	<input type="checkbox"/> A petition has been filed for this unsigned inventor							
Given Name (first and middle [if any])				Family Name or Surname				
TEJAL		PAREKH						
Inventor's Signature	<i>Tparekh</i>						Date	03/07/01
Residence: City	WOODBRIDGE	State	NJ	Country	U.S.A.	Citizenship	INDIA	
Post Office Address	39 PIKEVIEW LANE							
Post Office Address								
City	WOODBRIDGE	State	NJ	ZIP	07095	Country	U.S.A.	

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

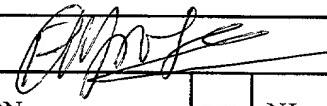
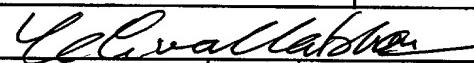
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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any])				Family Name or Surname				
HAINING		GU						
Inventor's Signature							Date	
Residence: City	MINHANG	State		Country	PEOPLES REP OF CHINA	Citizenship	CHINA	
Post Office Address	558/70/303 JIANG CHUAN LOAD							
Post Office Address								
City	MINHANG SHANGHAI 200240	State		ZIP		Country	PEOPLES REP. OF CHINA	
Name of Additional Joint Inventor, if any:	<input type="checkbox"/> A petition has been filed for this unsigned inventor							
Given Name (first and middle [if any])				Family Name or Surname				
GEORGE F.		NJOROGE						
Inventor's Signature							Date	3/8/01
Residence: City	UNION	State	NJ	Country	U.S.A.	Citizenship	KENYA	
Post Office Address	2597 JULIAT PLACE							
Post Office Address								
City	UNION	State	NJ	ZIP	07083	Country	U.S.A.	
Name of Additional Joint Inventor, if any:	<input type="checkbox"/> A petition has been filed for this unsigned inventor							
Given Name (first and middle [if any])				Family Name or Surname				
VIYYOOR MOOPIL		GIRIJAVALLABHAN						
Inventor's Signature							Date	3/8/01
Residence: City	PARSIPPANY	State	NJ	Country	U.S.A.	Citizenship	U.S.A.	
Post Office Address	10 MAPLEWOOD DRIVE							
Post Office Address								
City	PARSIPPANY	State	NJ	ZIP	07043	Country	U.S.A.	

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DECLARATION				ADDITIONAL INVENTOR(S) Supplemental Sheet				
				Page <u>5</u> of <u>7</u>				
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name (first and middle [if any])				Family Name or Surname				
ASHIT				GANGULY				
Inventor's Signature					3/14/2001		Date	
Residence: City	UPPER MONTCLAIR	State	NJ	Country	U.S.A.	Citizenship	U.S.A.	
Post Office Address	96 COOPER AVENUE							
Post Office Address								
City	UPPER MONTCLAIR	State	NJ	ZIP	07043	Country	U.S.A.	
Name of Additional Joint Inventor, if any:					<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname				
ANIL				SAKSENA				
Inventor's Signature					3/8/01		Date	
Residence: City	UPPER MONTCLAIR	State	NJ	Country	U.S.A.	Citizenship	U.S.A.	
Post Office Address	53 BEVERLY ROAD							
Post Office Address								
City	UPPER MONTCLAIR	State	NJ	ZIP	07043	Country	U.S.A.	
Name of Additional Joint Inventor, if any:					<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname				
EDWIN				JAO				
Inventor's Signature					Date		3/10/01	
Residence: City	WARREN	State	NJ	Country	U.S.A.	Citizenship	U.S.A.	
Post Office Address	20 CROSSWOOD WAY							
Post Office Address								
City	WARREN	State	NJ	ZIP	07059	Country	U.S.A.	

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Page 6 of 6

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any])				Family Name or Surname				
NANHUA HUGH				YAO				
Inventor's Signature	<i>Nanhua Hugh Yao</i>						Date	3/5/00
Residence: City	EDISON	State	NJ	Country	U.S.A.	Citizenship	U.S.A.	
Post Office Address	4 TIMOTHY COURT							
Post Office Address								
City	EDISON	State	NJ	ZIP	08837	Country	U.S.A.	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any])				Family Name or Surname				
ANDREW JOSEPH				PRONGAY				
Inventor's Signature	<i>Andrew Joseph Prongay</i>						Date	3/8/01
Residence: City	STEWARTSVILLE	State	NJ	Country	U.S.A.	Citizenship	U.S.A.	
Post Office Address	104 WILLOW GROVE ROAD							
Post Office Address								
City	STEWARTSVILLE	State	NJ	ZIP	08886	Country	U.S.A.	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any])				Family Name or Surname				
VINCENT STEWART				MADISON				
Inventor's Signature	<i>Vincent Stewart Madison</i>						Date	3-8-01
Residence: City	MOUNTAIN LAKES	State	NJ	Country	U.S.A.	Citizenship	U.S.A.	
Post Office Address	12 RONARM DRIVE							
Post Office Address								
City	MOUNTAIN LAKES	State	NJ	ZIP	07046	Country	U.S.A.	

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Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
BANCHA				VIBULBHAN			
Inventor's Signature					Date	3/8/01	
Residence: City	KENILWORTH	State	NJ	Country	U.S.A.	Citizenship	Thailand
Post Office Address	201 NORTH 24TH STREET						
Post Office Address							
City	KENILWORTH	State	NJ	ZIP	07033	Country	U.S.A.
Name of Additional Joint Inventor, if any:	<input type="checkbox"/> A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any])				Family Name or Surname			
Inventor's Signature					Date		
Residence: City		State		Country		Citizenship	
Post Office Address							
Post Office Address							
City		State		ZIP		Country	
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Post Office Address							
Post Office Address							
City		State		ZIP		Country	

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OR

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			<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>

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60/194,607	4/5/ 2000	<input type="checkbox"/>

[Page 1 of 2]

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Typed or printed name		Date
Signature		

Express Mail Label No. EL403238299US

Date April 3, 2001

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U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.  
As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:  Customer Number   Registered practitioner(s) name/registration number listed below

*Place Customer  
Number Bar Code  
Label here*

Name	Registration Number	Name	Registration Number

Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.  
Direct all correspondence to:  Customer Number or Bar Code Label  OR  Correspondence address below

Name	PALAIYUR S. KALYANARAMAN		Reg. No. 34634			
Address						
Address						
City		State		ZIP		
Country		Telephone	(908) 298-5068		Fax	(908) 298-5388

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:		<input type="checkbox"/> A petition has been filed for this unsigned inventor						
Given Name (first and middle if any)				Family Name or Surname				
KEVIN X.				CHEN				
Inventor's Signature							Date	
Residence: City	PISCATAWAY	State	NJ	Country	U.S.A.	Citizenship	U.S.A.	
Post Office Address	35 Royal Drive, #168							
Post Office Address								
City	PISCATAWAY	State	NJ	ZIP	08854	Country	U.S.A.	

Additional inventors are being named on the 4 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto

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Supplemental Sheet  
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<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
ASHOK		ARASAPPAN					
Inventor's Signature							Date
Residence: City	BRIDGEWATER	State	NJ	Country	U.S.A.	Citizenship	INDIA
Post Office Address	18 LARSEN COURT						
Post Office Address							
City	BRIDGEWATER	State	NJ	ZIP	08807	Country	U.S.A.
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
SRIKANTH		VENKATRAMAN					
Inventor's Signature							Date
Residence: City	FORDS	State	NJ	Country	U.S.A.	Citizenship	INDIA
Post Office Address	6 TULIP DRIVE, #3H						
Post Office Address							
City	FORDS	State	NJ	ZIP	08863	Country	U.S.A.
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
TEJAL		PAREKH					
Inventor's Signature							Date
Residence: City	WOODBRIDGE	State	NJ	Country	U.S.A.	Citizenship	INDIA
Post Office Address	39 PIKEVIEW LANE						
Post Office Address							
City	WOODBRIDGE	State	NJ	ZIP	07095	Country	U.S.A.

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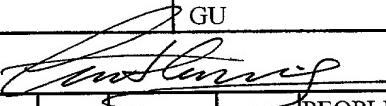
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Given Name (first and middle [if any])		Family Name or Surname						
HAINING		GU						
Inventor's Signature							Date	3/8/2001
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Post Office Address	558/70/303 JIANG CHUAN LOAD							
Post Office Address								
City	MINHANG SHANGHAI 200240	State		ZIP		Country	PEOPLES REP. OF CHINA	
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any])		Family Name or Surname						
GEORGE F.		NJOROGE						
Inventor's Signature							Date	
Residence: City	UNION	State	NJ	Country	U.S.A.		Citizenship	KENYA
Post Office Address	2597 JULIAT PLACE							
Post Office Address								
City	UNION	State	NJ	ZIP	07083	Country	U.S.A.	
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any])		Family Name or Surname						
VIYYOOR MOOPIL		GIRIJAVALLABHAN						
Inventor's Signature							Date	
Residence: City	PARSIPPANY	State	NJ	Country	U.S.A.		Citizenship	U.S.A.
Post Office Address	10 MAPLEWOOD DRIVE							
Post Office Address								
City	PARSIPPANY	State	NJ	ZIP	07043	Country	U.S.A.	

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**DECLARATION****ADDITIONAL INVENTOR(S)**  
Supplemental Sheet  
Page 5 of 7**Name of Additional Joint Inventor, if any:** A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])

Family Name or Surname

ASHIT

GANGULY

Inventor's Signature

Date

Residence: City

UPPER MONTCLAIR

State

NJ

Country

U.S.A.

Citizenship

U.S.A.

Post Office Address

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Post Office Address

City

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ZIP

07043

Country

U.S.A.

**Name of Additional Joint Inventor, if any:** A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])

Family Name or Surname

ANIL

SAKSENA

Inventor's Signature

Date

Residence: City

UPPER MONTCLAIR

State

NJ

Country

U.S.A.

Citizenship

U.S.A.

Post Office Address

53 BEVERLY ROAD

Post Office Address

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UPPER MONTCLAIR

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NJ

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07043

Country

U.S.A.

**Name of Additional Joint Inventor, if any:** A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])

Family Name or Surname

EDWIN

JAO

Inventor's Signature

Date

Residence: City

WARREN

State

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Country

U.S.A.

Citizenship

U.S.A.

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20 CROSSWOOD WAY

Post Office Address

City

WARREN

State

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07059

Country

U.S.A.

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**DECLARATION****ADDITIONAL INVENTOR(S)  
Supplemental Sheet  
Page 6 of 7**

<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])		Family Name or Surname					
NANHUA HUGH		YAO					
Inventor's Signature							Date
Residence: City	IRVINE	State	CA	Country	U.S.A.	Citizenship	U.S.A.
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Post Office Address							
City	IRVINE	State	CA	ZIP	92606	Country	U.S.A.
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])		Family Name or Surname					
ANDREW JOSEPH		PRONGAY					
Inventor's Signature							Date
Residence: City	STEWARTSVILLE	State	NJ	Country	U.S.A.	Citizenship	U.S.A.
Post Office Address	104 WILLOW GROVE ROAD						
Post Office Address							
City	STEWARTSVILLE	State	NJ	ZIP	08886	Country	U.S.A.
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])		Family Name or Surname					
VINCENT STEWART		MADISON					
Inventor's Signature							Date
Residence: City	MOUNTAIN LAKES	State	NJ	Country	U.S.A.	Citizenship	U.S.A.
Post Office Address	12 RONARM DRIVE						
Post Office Address							
City	MOUNTAIN LAKES	State	NJ	ZIP	07046	Country	U.S.A.

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<b>DECLARATION</b>		ADDITIONAL INVENTOR(S) Supplemental Sheet Page <u>1</u> of <u>1</u>				
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name (first and middle [if any])		Family Name or Surname				
BANCHA		VIBULBHAN				
Inventor's Signature					Date	
Residence: City	KENILWORTH	State	NJ	Country	U.S.A.	Citizenship
Post Office Address	201 NORTH 24TH STREET					
Post Office Address						
City	KENILWORTH	State	NJ	ZIP	07033	Country
Name of Additional Joint Inventor, if any:	<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])		Family Name or Surname				
Inventor's Signature					Date	
Residence: City		State		Country		Citizenship
Post Office Address						
Post Office Address						
City		State		ZIP		Country
Name of Additional Joint Inventor, if any:	<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])		Family Name or Surname				
Inventor's Signature					Date	
Residence: City		State		Country		Citizenship
Post Office Address						
Post Office Address						
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